SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN

RAPA

Date: Permit #: Amount Paid: ない。 1,0000 5-14

INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to: Bayfield County Zoning Department.
DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN IS

HOW DO I FILL OUT ATION (visit our website www.bayfieldcou

Refund:

wledge that I (we) ept liability which ave access to the	IES rrect and complete. I (we) acknowledge that I (we) issue a permit. I (we) further accept liability which inistering county ordinances to have access to the	FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES by accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and y of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a py of all information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering this information.	STRUCTION WITHOUT A PERIV us) and to the best of my (our) kno vill be relied upon by Bayfield Cou application. I (we) consent to	TING CONSTRUCTION ned by me (us) and to the lind that it will be relied in with this application.	FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUE this application (including any accompanying information) has been examined by me (us) are the detail and accuracy of all information I (we) am (are) providing and that it will be payfield County relying on this information (we) am (are) providing in or with this applic	FAILURE TO OB ing any accompanying in couracty of all information in on this information in the couracty of th	application (include the detail and action the detail ac	i (we) declare that thing am (are) responsible for may be a result of Ba
413	9 x 7 )	(A	IDGE	V BR	plain) ATU/UT		Staff	Secretarial Staff
-	ı ı				Conditional Use: (explain)	Condition		· E
	× )	The state of the s			Special Use: (explain)	Special Us		
				teration (specify)	Accessory Building Addition/Aiteration	Accessory	suance	Rec'd for Issuanc
	×				Building (specify)	Accessory Building	T—	Wunicipal Ose
					Addition/Alteration (specify)	Addition/	; [	
			TANKE TO THE TANKE	2)	Mobile Home (manufactured date)	Mobile Ho		
· ·	× )	cooking & food prep facilities) (		sleeping quarters,	Bunkhouse w/ (☐ sanitary, or ☐	Bunkhous		
1	×		1111111	ge	with Attached Garage		ISP I	Commercial Use
	×××		9,000,000	LINA.	with a Deck	L'ATTENDA		
- Printer and the second	×			A CONTRACTOR OF THE CONTRACTOR	with (2 <sup>nd</sup> ) Porch			
	×				with a Porch		Jse	X Residential Use
	× ×			ack, etc.)	Residence (i.e. cabin, hunting shack, etc.)	Residence		
***	×		2011	(first structure on property)	1 13	Principal Structure		
Square Footage	imensions	D	re	Proposed Structure	þ			Proposed Use
7	Height:	Width: 7		Length: 59			ction:	Proposed Construction:
		Width:		Length:		ing applied for	: (if permit be	Existing Structure: (If permit being applied for is relevant to it)
-		None				401414		
					☐ Foundation		Property	<b>4</b>
	ntract)	Portable (w/servi	None	- Little - L	No Basement	iness on	Relocate (existing bldg)	
	Vauited (min 200 gallon)	☐ Sanitary (Exists) Specify Type:	J G			ň	Conversion	1500,00
□ Well	ily Type:	Constant (Exists) Special	- 1	X Year Round	1-Story + Loft	Addition/Alteration	☐ Addition/	
City	fy Type:	Municipal/City			1-Story	struction		
	operty?	Is on the property?	bedrooms		and/or basement	applying for)	(What are you applying for)	* include donated time & material
Water	нe of v Svstem	What Type of Sewer/Sanitary System	2 #	<u> </u>	# of Stories	ect	Project	Value at Time of Completion
					The state of the s			□ Non-Shoreland
	K			if yesconuniue —	II yes			
Present?  XYes	Is Property III Floodplain Zone?  No	is from Shoreline :	Distance Structure	If yes—continue—>  Pond or Flowage	Creek or Landward side of Floodplain? If yes—continue  Is Property/Land within 1000 feet of Lake, Pond or Flowage	y/Land within : y/Land within :	Creek or Lar	X Shoreland →
<b>?</b>			Dictance Struc	- 1 1 4	So feet of Pinner			
CT.	Acreage	Lot Size	OUER	Town of:	N, Range	5	Township	Section 3
	<b>n</b> :	Block(s) No. Subdivision	Lot(s) No.	Vol & Page	t Lot(s) CSM	Gov't Lot	Z 1/4	N W1/4,
(s) 433	251 Page(s) 433	- 2 02 - 000 Recorded	19-07-03	digits)	Tax Statement) 04- C	es(Use	Legal Description:	PROJECT LOCATION
Written Authorization Attached Yes X No	Written A Attached YOS   Yes >	- [	Agent Mailing Add	10ne: 2728 5-263-	Agent P	cation on behalf o	rson Signing Appl	Authorized Agent: (Person Signing Application on behalf of Owner(s))  TAN MONSON /S INTE
hone:	Plumber Phone:	C	ımber:	Phone:	Contractor Ph	7	かられる中	Contractor:
	Cell Phone:	エエのエレ		DCT.	_	l.	)	Address of Property:
263.268	Telephone: 715 - 263	ン レ ト ト ト ト ト ト ト ト ト ト ト ト ト	<u>Q</u>	ddress:	agent.	~3	3 2 2 3	Owner's Name:
□ OTHER	□ B.O.A. □ 0	☐ SPECIAL USE	☐ CONDITIONAL USE	RIVY	SANI	X LAND USE	QUESTED-	TYPE OF PERMIT REQUESTED-
y.org/zoning/asp)	e www.bayfieldcounty.org/zoning/asp	HOW DO I FILL OUT THIS APPLICATION (visit our website	V DO I FILL OUT TH		O NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.	PERMITS HAVE	TION UNTIL ALI	O NOT START CONSTRU

Address to send permit DERRY Attach

Action

Applicant - Please Complete Plot Plan on Reverse Side S4005

Applicant - Please Complete Plot Plan on Reverse Side S4005 Owner(s) (If there are N

DUNG Where listed on the Deed All Owners

where must sign or letter(s) of authorization must acco

mpayy this application)

Date

10)

Date

Authorized Agent:

(If you are signing on behalf of the owner(s) a letter of authorization must MONSON,

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